

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**Hoyer for Congress**

Full Name (Last, First, Middle Initial)

**Joseph R. Densford**

Mailing Address PO Box 537

City

Leonardtown

State

MD

Zip Code

20650-0537

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self Employed

Occupation

Attorney

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		09		2015

Transaction ID : VNVNKE2VM45

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Dixie C. Miller**

Mailing Address PO Box 177

822 Oyster Bay Place

City

Dowell

State

MD

Zip Code

20629-0177

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Calvert Memorial Hospital

Occupation

Director

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2015

Transaction ID : VNVNKE1FX55

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Martin Fairclough**

Mailing Address 320 23rd St S

Apt 1218

City

Arlington

State

VA

Zip Code

22202-3769

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2015

Transaction ID : VNVNKE209B5

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3000.00